

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2						
3						
4						
5						
6						
7						
8						
9						
10						
11	(10)		10			
12	(10)		10			
13	(10)		10			
14	(10)		10			
15	(10)		10			
16			1		1	
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33			1			
34						
35						
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45						
46						
47						
48						
49						
50						
TOTAL IND.	1		3		2	
TOTAL DEP.	59				27	21
TOTAL CLAIMS	60				29	21

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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56						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS